

AUTO CR - LOG SUMMARY #1075918

TYPE: INFO

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
It is reported that [REDACTED] resisted arrest by threatening officers with a knife and refused to put it down when ordered; Officer Page discharged his TASER striking [REDACTED] and assisting in taking him into custody.	(None Entered)		

REFERENCE: Log #1075896

Reporting Party Information

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	HAWKINS, TIMOTHY M	1454	[REDACTED]	011 /	SERGEANT OF POLICE	M	WHI	

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
30-JUN-2015 02:51 - 30-JUN-2015 02:51	[REDACTED]	1131	011	290 - RESIDENCE	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
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Other Involved Parties

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD	Victim/Subject	[REDACTED]				M	BLK	[REDACTED]	
CPD Employee	Involved Member	PAGE, RICKY L	11349	[REDACTED]	011 /	POLICE OFFICER	M	BLK	[REDACTED]

Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y

Investigator History

Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	26-AUG-2015 05:21	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	No allegations of misconduct.
CLOSED AT C.O.P.A.	26-AUG-2015 05:21	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	
PENDING ASSIGN TEAM	08-JUL-2015 11:46	QUERFURTH, PATRICK	SUPERVISING INV COPA	113 /	
PENDING SUPERVISOR REVIEW	08-JUL-2015 10:11	HILL, CHANTELLE	INVESTIGATOR I COPA	113 /	
PRELIMINARY	08-JUL-2015 10:11	HILL, CHANTELLE	INVESTIGATOR I COPA	113 /	
PRELIMINARY	30-JUN-2015 11:29	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	- download -
PENDING SUPERVISOR REVIEW	30-JUN-2015 11:28	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	
PRELIMINARY	30-JUN-2015 07:37	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					GOLDSTON, MICHAEL	30-JUN-2015 07:37			
	DOCUMENTS - INTAKE INCIDENT		2	Officer Ricky Page #11349.	N	GOLDSTON, MICHAEL	30-JUN-2015 11:22	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		4		N	GOLDSTON, MICHAEL	30-JUN-2015 11:21	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	PO Page	N	HILL, CHANTELLE	08-JUL-2015 10:10	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		5		N	GOLDSTON, MICHAEL	30-JUN-2015 11:20	APPROVED		
	RELATED - INCIDENT LOG NO.					STOUTENBOROUGH, ANDREA	26-AUG-2015 05:24			
	DOCUMENTS - INTAKE INCIDENT		1		N	HILL, CHANTELLE	08-JUL-2015 10:09	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1		N	HILL, CHANTELLE	08-JUL-2015 10:11	APPROVED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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FACE SHEET (Notification Date: 30-JUN-2015) - LOG #1075918

TYPE: INFO

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	HAWKINS, TIMOTHY M	1454		011 /	SERGEANT OF POLICE	M	WHI		

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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	30-JUN-2015 07:37	GOLDSTON, MICHAEL	

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	26-AUG-2015 05:21	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	No allegations of misconduct.
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PRELIMINARY	30-JUN-2015 11:29	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	- download -
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PRELIMINARY	30-JUN-2015 07:37	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C (REV. 6/30)

ARREST REPORTING

OFFENDER	Name	[REDACTED]		Beat: 1131	Male	[REDACTED]
	Res	[REDACTED]		Unknown	Black	
INCIDENT	DOB:	[REDACTED]		AGE: 49 years	5' 11"	[REDACTED]
	POB:	Illinois		DLN: [REDACTED]	240 lbs	
CHARGES	ARMED WITH Lethal Cutting Instrument				Brown Eyes	[REDACTED]
					Black Hair	
RECOVERED NARCOTICS	Arrest Date: 30 June 2015 02:53		TRR Completed? Yes		Total No Arrested: 1	[REDACTED]
	Location: [REDACTED]		Beat: 1131		Co-Arrests	
WARRANT	Holding Facility: District 011 Male Lockup				Assoc Cases	[REDACTED]
	Resisted Arrest? Yes				DCFS Ward ? No	
CHARGES	1	Offense As Cited	720 ILCS 5.0/9-1-A-1		Domestic Related	[REDACTED]
	2	Offense As Cited	720 ILCS 5.0/12-2-B-4		State Of Illinois, P.O. Page	
RECOVERED NARCOTICS	NO NARCOTICS RECOVERED					[REDACTED]
WARRANT	NO WARRANT IDENTIFIED					[REDACTED]

ARREST REPORTING

VICTIM

Name	Res	Beat:1131	Female Black DOB Age:49 years	Injured? Yes Deceased? Yes Hospitalized? No Treated and Released? No
			Comments:	

VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, P.O. Page	Res: 3151 W Harrison St Chicago, IL 60612 312-746-8386	Beat:1134	Male DOB: Age:	Injured? No Deceased? No Hospitalized? No Treated and Released? No
			Comments:	

COMPLAINANT

Name	Res	Beat:731	Male Black DOB Age:28 years	Injured? No Deceased? No Hospitalized? No Treated and Released? No
			Comments:	

ARRESTEE
VEHICLE

NO ARRESTEE VEHICLE INFORMATION ENTERED

PROPERTIES

Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

ARREST REPORTING

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

event [REDACTED]
in summary, a/os responded to a call of check the well being. upon arriving, a/os met with complainant [REDACTED] who related that he had seen a facebook post by arrestee stating that arrestee had killed victim [REDACTED]. arrestee is the boyfriend of victim. complainant further related that he had tried calling victim several times on her cell phone and she was not answering. complainant also stated that he could hear arrestee inside arrestee and victim's apartment making noise and throwing things around. at this time, arrestee was observed by a/os leaning out of his third floor apartment window and yelling that officers should kill him, he was dead already and that he had taken poison three times already. when a/os asked arrestee through the window where victim was, arrestee responded "she is with tommy, she isn't here." arrestee then stated "i'm not coming down, you're going to have to break in and kill me." at this time, a/os approached the third floor apartment rear door, knocked and announced office and directed arrestee to open the door. arrestee responded with "you're going to have to break in and kill me." rear door was previously broken and leaning on frame. at this time, 1120r sgt.hawkins made entry followed by po paige and a/os. at this time, hawkins observed arrestee with a knife in hand. a/os directed arrestee to drop the knife multiple times. arrestee repeatedly stated "you're gonna have to kill me." arrestee then turned towards p.o. paige and took an aggressive posture. p.o. page deployed taser to apprehend arrestee. arrestee fell in apartment bathroom with knife still in hand. at this time, a/o miesczak disarmed arrestee and dropped the knife into the bath tub, then proceeded to handcuff arrestee. at this time, 1111r ofc conlisk discovered victim lying prone in apartment bedroom, unresponsive. 1111r then observed a computer cord wrapped around victim's neck. 1111r called for ems. amb 23 arrived on scene at 0257. victim pronounced on scene by [REDACTED] arrestee taken into custody and transported to [REDACTED] by beat 1172r. arrestee treated and released by [REDACTED] arrestee then transported to 011 by 1172r for processing. name check clear, not in gipp, trap or ssl. extended taser probe inventoried under # [REDACTED]

m/e hines #69 notified at 0408 (2015-02731), news affairs p.o. alfaro #19618 notified at 0355, crime lab sarlo #13131 notified at 0402, dss odonnell #2167 notified at 0413, area north detective spain #21403 notified at 0310, cpic chibe #7303 notified at 0424

Desired Court Date:

Branch:

Court Sgt Handle? No

BOND INFORMATION NOT AVAILABLE

ATTESTING OFFICER:

I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.

Attesting Officer: #17622 FLORES, E [REDACTED] 30 JUN 2015 07:29

ARRESTING OFFICER(S):

1st Arresting Officer: #15757 MIESZCAK, D J [REDACTED] Beat 1133R

2nd Arresting Officer: #17622 FLORES, E [REDACTED] Beat 1133R

APPROVING SUPERVISOR:

Approval of Probable Cause : #1434 LASCH, A P [REDACTED] 30 JUN 2015 07:38

ARREST PROCESSING REPORT

Holding Facility: District 011 Male Lockup
Received in Lockup: 30 June 2015 07:57
Prints Taken: 30 June 2015 07:57
Palprints Taken: Yes
Photograph Taken: 30 June 2015 08:02
Released from Lockup:

Time Last Fed:
Time Called: Phone#:
Cell #: A
Transport Details : 2PO 1172R 30-JUN-2015 03:28

VISUAL CHECK OF ARRESTEE

ARRESTEE QUESTIONNAIRE

Is there obvious pain or injury? No
Is there obvious signs of infection? No
Under the influence of alcohol/drugs? No
Signs of alcohol/drug withdrawal? No
Appears to be despondent? No
Appears to be irrational? No
Carrying medication? No

Presently taking medication? No
(if female)are you pregnant? No
First time ever been arrested? No
Attempted suicide/serious harm? No
Serious medical or mental problems? No
Are you receiving treatment? No
Transgender/intersex/gender non-conforming? No
Deaf/hard of hearing-request interpreter for court? No
Interpreter needed? (indicate language) No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

Printed And Returned To Det

LOCKUP KEEPER COMMENTS:

30 JUN 2015 08:43 SLATER, Frank K : Place In Cell# A
30 JUN 2015 08:44 SLATER, Frank K : Place In Cell# A

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

INTERVIEW LOG

NO INTERVIEWS LOGGED

VISITOR LOG

NO VISITORS LOGGED

ARREST PROCESSING REPORT

MOVEMENT LOG	Action	By	Destination	Reason
	PERMANENT MOV		30 JUN 2015 05:18 District 011 Male Lockup	
	RELEASED BY	#1434 Lasch, Alan P ([REDACTED]	30 JUN 2015 07:42 District 011 Male Lockup	
	RECEIVED BY	#20592 Regal, Mark A ([REDACTED]	30 JUN 2015 07:42 Area 4	Interview
	RECEIVED BY	#5666 Menoni, Joseph A ([REDACTED]	30 JUN 2015 07:56 District 011 Male Lockup	In To Print.
	RECEIVED BY	#1434 Lasch, Alan P ([REDACTED]	30 JUN 2015 08:11 Central Male Lockup	Permanent Move Record

Watch Commander Comments:

DOES NOT APPLY TO THIS ARREST

ARRESTEE PROCESSING PERSONNEL:

		Beat
Searched By:	#5666 MENONI, J A ([REDACTED]	
Lockup Keeper:	#17565 PHILBIN, T P ([REDACTED]	
Assisting Arresting Officer:	#11349 PAGE, R L ([REDACTED]	1106E
Assisting Arresting Officer:	#1454 HAWKINS, T M ([REDACTED]	1120R
Assisting Arresting Officer:	#16730 MEEKS, D D ([REDACTED]	1132R
Assisting Arresting Officer:	#16816 BLANCO, A J ([REDACTED]	1111R
Assisting Arresting Officer:	#2795 CLARK, R J ([REDACTED]	1132R
Assisting Arresting Officer:	#4308 JAMES, E T ([REDACTED]	1106E
Assisting Arresting Officer:	#8092 CONLISK, B J ([REDACTED]	1111R
Fingerprinted By:	BARRY, C ([REDACTED]	

APPROVAL PERSONNEL:

CHICAGO POLICE DEPARTMENT
ORIGINAL CASE INCIDENT REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653
(For use by Chicago Police Department Personnel Only)
CPD-11.388(6/03)-C)

RD #: [REDACTED]

EVENT # [REDACTED]

Case ID: [REDACTED]

ASSIGNED TO FIELD

IUCR: 0110 - Homicide - First Degree Murder
0552 - Assault - Aggravated Po:Knife/Cut Instr

Occurrence Location: [REDACTED]
090 - Apartment
Occurrence Date: 30 June 2015 02:30
Beat: 1131

Unit Assigned: 1133R
RO Arrival Date: 30 June 2015 02:33
Domestic Related Incident # Offenders: 1

FAMILY MEMBER NOTIFIED

Name: [REDACTED]
Res: [REDACTED] Beat: 0731
Beat: 5100

Other Communications and Availability

Business @
Email:
Cellular [REDACTED]
Phone:
Personal @
Email:

VICTIM - Individual

Name: PAIGE, Po
3151 W Harrison St Beat: 1134
Chicago, IL
Sobriety: Sober

Police Officer

Demographics

Age: Years

Other Communications and Availability

Residence 312-746-8386
Phone:

VICTIM - Individual

Name: [REDACTED]
Res: [REDACTED] Beat: 1131
Beat: 5100
Sobriety: Unknown

Demographics

Female DOB: [REDACTED]
Black Age: 49 Years
5'07, Birth Place: Illinois
243 lbs DLN: [REDACTED]
Brown Eyes
Brown Hair
Medium Hair Style
Medium Complexion

Identification:

Type State Number
State Id Illinois [REDACTED]

PERSON REPORTING OFFENSE - Individual	
Name: [REDACTED]	Beat: 0731
	Beat: 5100
Res: [REDACTED]	
Demographics	
Male	DOB: [REDACTED]
Black	Age: 28 Years
5'11,	Birth Place: Illinois
180 lbs	DLN: [REDACTED]
Brown Eyes	
Black Hair	
Braids Hair Style	
Medium Complexion	

Injury Info (Victim)	
Injured by offender	Injury Extent: Fatal
Removed By: Allied Services	Removed Date: 30 June 2015
Authorized By: M.E. HINES #69	
Given?	
Responding Unit: AMBULANCE 23	
Type	Weapon Used
Asphyxiation	Other
	Other Weapon Used
	Other - Electrical Chord

Suspect #1	
Name: [REDACTED]	Beat: 1131
Res: [REDACTED]	
Demographics	
Male	DOB: [REDACTED]
Black	Age: 49 years
5'11,	Birth Place: IL
240 lbs	
Brown Eyes	Suspected of Using: Weapon
Black Hair	
Shaved Hair Style	
Medium Complexion	

RELATIONSHIP	
(Victim)	(Offender)
PAIGE, Po	
is a	No Relationship of
(Victim)	(Offender)
[REDACTED]	
is a	Girlfriend of

Order of Protection Info	
Order of Protection #: - IL	
Reason: Victim Deceased	
Reason: Victim Deceased	

Chicago Police Department - Incident Report

RD #: [REDACTED]

NOTIFICATIONS

Request Type	Unit	Agency Name	Date	Star #	Name
Notification	177	Forensic Services Division	30 June 2015 04:02	13131	,SARLO
Request Type			Date	Star #	Name
Notification			30 June 2015 04:08	69	,HINES
Request Type	Unit	Agency Name	Date	Star #	Name
Notification	630	Detective Area - North	30 June 2015 03:10	21403	,SPAIN
Request Type	Unit	Agency Name	Date	Star #	Name
Notification	116	Deployment Operations Center	30 June 2015 04:24	7303	,CHIBE
Request Type			Date	Star #	Name
Notification			30 June 2015 03:55	19618	,ALFARO
Request Type	Unit	Agency Name	Date	Star #	Name
On Scene	630	Detective Area - North	30 June 2015 03:23	20598	,HEERDT
Request Type	Unit	Agency Name	Date	Star #	Name
On Scene	630	Detective Area - North	30 June 2015 03:23	20592	,REGAL
Request Type	Unit	Agency Name	Date	Star #	Name
On Scene	277	Forensic Services Evidence Technician Section	30 June 2015 04:30	17875	,DELIS

NARRATIVE

EVENT [REDACTED] IN SUMMARY, R/OS RESPONDED TO CALL OF CHECK WELL BEING AT ABOVE LOCATION. ON SCENE OUTSIDE OF ABOVE ADDRESS, R/OS MET BY [REDACTED] (PERSON REPORTING OFFENSE, VICTIM'S SON) WHO RELATED THAT HE FEARED [REDACTED] (VICTIM, PERSON REPORTING'S MOTHER) HAD BEEN KILLED BY [REDACTED] (OFFENDER, VICTIM'S BOYFRIEND). [REDACTED] (PERSON REPORTING OFFENSE) RELATED THAT HE HAD SEEN A FACEBOOK POST BY OFFENDER ON VICTIMS PAGE STATING THAT OFFENDER HAD KILLED [REDACTED] (VICTIM). [REDACTED] (PERSON REPORTING OFFENSE) RELATED THAT HE HAD TRIED CALLING VICTIM SEVERAL TIMES ON HER CELL PHONE AND SHE WASN'T ANSWERING. [REDACTED] (PERSON REPORTING OFFENSE) ALSO STATED THAT HE COULD HEAR OFFENDER UPSTAIRS MAKING NOISE AND THROWING THINGS. AT THIS TIME, OFFENDER WAS OBSERVED BY R/OS LEANING OUT THE 3RD FLOOR APARTMENT WINDOW. OFFENDER STATED SEVERAL TIMES THAT OFFICERS SHOULD KILL HIM, HE WAS DEAD ALREADY, AND THAT HE HAD TAKEN POISON THREE TIMES TODAY. WHEN R/OS ASKED OFFENDER WHERE VICTIM WAS, OFFENDER STATED "SHE IS WITH [REDACTED] SHE ISN'T HERE". OFFENDER THEN STATED "IM NOT COMING DOWN. YOU'RE GONNA HAVE TO BREAK IN AND KILL ME". AT THIS TIME, R/OS APPROACHED 3RD FLOOR APARTMENT REAR DOOR, KNOCKED AND ANNOUNCED OFFICE, AND DIRECTED OFFENDER TO OPEN DOOR. OFFENDER REPEATED "YOU'RE GONNA HAVE TO BREAK IN AND KILL ME". REAR DOOR WAS ALREADY BROKEN AND LEANING ON FRAME. 1120R HAWKINS MADE ENTRY FOLLOWED BY PO PAIGE (VICTIM AND COMPLAINANT) AND R/OS. AT THIS TIME, HAWKINS OBSERVED OFFENDER WITH KNIFE IN HAND. R/OS DIRECTED OFFENDER TO DROP THE KNIFE MULTIPLE TIMES. OFFENDER REPEATEDLY STATED "YOU'RE GONNA HAVE TO KILL ME". OFFENDER THEN TURNED TOWARDS PO PAIGE (VICTIM AND COMPLAINANT) AND TOOK AN AGGRESSIVE POSTURE. PO PAIGE (VICTIM AND COMPLAINANT) DEPLOYED TASER TO APPREHEND OFFENDER (EXPENDED TASER PROBE INV [REDACTED] OFFENDER FELL IN APARTMENT BATHROOM WITH KNIFE STILL IN HAND. AT THIS TIME, R/O DISARMED OFFENDER AND DROPPED KNIFE INTO BATH TUB, THEN PROCEEDED TO CONTROLLED HANDCUFFING. AT THIS TIME, 1111R DISCOVERED [REDACTED] (VICTIM, OFFENDER'S GIRLFRIEND) LYING PRONE IN APARTMENT BEDROOM, UNRESPONSIVE. 1111R THEN OBSERVED A COMPUTER CHORD WRAPPED AROUND VICTIMS NECK. 1111R CALLED FOR EMS. AMB 23 ARRIVED ON SCENE AT 0257. VICTIM PRONOUNCED ON SCENE BY [REDACTED] OFFENDER TAKEN INTO CUSTODY AND TRANSPORTED BY 1172R TO [REDACTED] OFFENDER TREATED AND RELEASED BY [REDACTED] OFFENDER THEN TRANSPORTED TO 011 BY 1172R FOR PROCESSING. AREA NORTH DETECTIVES 5364 HEERDT #20598 AND REGAL #20592 ON SCENE AT 0323. AREA NORTH DETECTIVE DESK SPAIN #21403 AT 0310. MEDICAL EXAMINER HINES #69 NOTIFIED AT 0408, CASE [REDACTED] NEWS AFFAIRS ALFARO #19618 NOTIFIED AT 0355. CRIME LAB SARLO #13131 NOTIFIED AT 0402. DSS O'DONNELL #2167 NOTIFIED 0413. CPIC CHIBE #7303 AT 0424. E.T. DELIS #17875 ON SCENE 0430.

NOTIFICATION: SERGEANT HAWKINS Beat#: Star#: 1454 Emp#: Date: 30-JUN-2015 Time: 0233 ONS

NOTIFICATION: DISTRICT DESK O'DONNELL Beat#: Star#: 2167 Emp#: Date: 30-JUN-2015 Time: 0413 NOT

- STAR#: 1454 NAME: TIMOTHY HAWKINS BEAT: 1120R
- STAR#: 4308 NAME: ERIC JAMES BEAT: 1106E
- STAR#: 11349 NAME: RICKY PAGE BEAT: 1106E
- STAR#: 8092 NAME: BRIAN CONLISK BEAT: 1111R
- STAR#: 16816 NAME: ANTHONY BLANCO BEAT: 1111R
- STAR#: 5143 NAME: JULIO RUIZ BEAT: 1172R
- STAR#: 12097 NAME: STEPHEN WHITEHEAD BEAT: 1172R

PERSONNEL

	Star No	Emp No	Name	User	Date	Unit	Beat
Approving Supervisor	1454	[REDACTED]	HAWKINS, Timothy, M	[REDACTED]	30 Jun 2015 08:36	011	
Detective/Investigator	20598	[REDACTED]	HEERDT, Edward, W	[REDACTED]	30 Jun 2015 09:09	630	
Reporting Officer	15757	[REDACTED]	MIESZCAK, Daniel, J	[REDACTED]	30 Jun 2015 08:09	011	1133R

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED	1. DATE OF INCIDENT 30-JUN-2015		TIME 02:53:00		2. ADDRESS OF OCCURRENCE [REDACTED]				3. LOCATION CODE 090		4. BEAT/OCCUR 1131													
	5. POSITION 9161		6. LAST NAME PAGE		7. FIRST NAME RICKY L		8. STAR NO. 11349		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE BLK		11. AGE [REDACTED]		12. HT. 602		13. WT. 195							
	14. DATE OF APPT. 15-MAR-2013				15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT 011 1106E		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No											
SUBJECT INFORMATION	20. LAST NAME [REDACTED]				21. FIRST NAME [REDACTED]				22. M.I. [REDACTED]		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE BLK		25. D.O.B. [REDACTED]		26. HT. 511		27. WT. 240					
	28. ADDRESS [REDACTED]				29. TELEPHONE NO. [REDACTED]				30. WAS SUBJECT ARMED? OTHER (SPECIFY), VERBAL THREAT (ASSAULT) <input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No				31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No									
	33. WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED]				34. BY WHOM? [REDACTED]				35. CONDITION <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid				36. CHARGES PLACED 720 ILCS 5.0/9-1-A-1, 720 ILCS 5.0/12-2-B-4				37. CB NO. [REDACTED]		IR NO. <input type="checkbox"/> DNA					
REASON FOR USE OF FORCE (Check all that apply)	38. <input type="checkbox"/> DNA		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE													
	SUBJECT'S ACTIONS		DID NOT FOLLOW VERBAL DIRECTION <input checked="" type="checkbox"/> STIFFENED (DEAD WEIGHT) <input type="checkbox"/> OTHER _____		FLED <input type="checkbox"/> PULLED AWAY <input type="checkbox"/> OTHER _____		IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/> OTHER _____		ATTACK WITH WEAPON <input checked="" type="checkbox"/> ATTACK WITHOUT WEAPON <input type="checkbox"/> OTHER _____		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/> WEAPON <input type="checkbox"/> OTHER _____													
MEMBER'S RESPONSE	MEMBER PRESENCE <input checked="" type="checkbox"/> VERBAL COMMANDS <input checked="" type="checkbox"/> ESCORT HOLDS <input type="checkbox"/> WRISTLOCK <input type="checkbox"/> ARMBAR <input type="checkbox"/> PRESSURE SENSITIVE AREAS <input type="checkbox"/> CONTROL INSTRUMENT <input type="checkbox"/> OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/> OTHER _____		OPEN HAND STRIKE <input type="checkbox"/> TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/> OC CHEMICAL WEAPON <input type="checkbox"/> CANINE <input type="checkbox"/> TASER (Probe Discharge) <input checked="" type="checkbox"/> TASER (Contact Stun) <input type="checkbox"/> TASER (Spark Displayed) <input type="checkbox"/> OTHER _____		ELBOW STRIKE <input type="checkbox"/> CLOSED HAND STRIKE/PUNCH <input type="checkbox"/> IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/> OTHER _____		KNEE STRIKE <input type="checkbox"/> KICKS <input type="checkbox"/> IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		FIREARM <input type="checkbox"/> OTHER _____															
	39. <input type="checkbox"/> DNA		* OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) [REDACTED]				40. ADDITIONAL INFORMATION [REDACTED]																	
WEAPON DISCHARGE INCIDENT	POSITION		STAR NO.		UNIT																			
	41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input checked="" type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		42. INCIDENT OCCURRED <input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors		43. LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44. WEATHER CONDITIONS CLEAR																	
	45. MAKE/MANUFACTURER		46. MODEL		47. BARREL LENGTH		48. CALIBER/GAUGE																	
	49. TASER DART ID NO. DNA		50. WEAPON SERIAL No. (Include Letters) X30001H2W		51. CHICAGO GUN REG. NO.		52. IL FIREARM OWNER ID. NO.		53. HANDGUN CERTIFICATE NO.															
CASE INFO.	54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.		56. TYPE OF AMMUNITION USED		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER 1		58. TOTAL NO. OF SHOTS MEMBER FIRED															
	59. WHO FIRED FIRST SHOT <input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify)		63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify)		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO											
	66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)																	
	70. EVENT NO. [REDACTED]																							
SIGNATURES	71. R.D. NO. [REDACTED]																							
	72. NOTIFICATIONS (OC OR TASER INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DSS & LT./DIST. OF OCCUR. <input type="checkbox"/> CPIC NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DSS/DIST. OF OCCUR & OCIC <input type="checkbox"/> CPIC <input type="checkbox"/> DET. DIV. Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.																							
SIGNATURES	73. REPORTING MEMBER (Print Name) PAGE, RICKY L STAR/EMPLOYEE NO. 11349 SIGNATURE [REDACTED] 30-JUN-2015 06:20:33																							
	74. REVIEWING SUPERVISOR (Print Name) HAWKINS, TIMOTHY M STAR NO. 1454 SIGNATURE [REDACTED] DATE REVIEWED 30-JUN-2015 06:23:08 TIME 06:23:08																							

LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER; 2.) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER; 3.) ALL INCIDENTS INVOLVING THE DISCHARGE OF IMPACT MUNITIONS BY A DEPARTMENT MEMBER; 4.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 THROUGH 3.

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☐ REFUSED

☒ INTERVIEW NOT CONDUCTED (Specify Reason)

R/Lt. was unable to interview the offender, due to the fact that he refused to answer any questions and requested an attorney.

76. LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

Based on the review of all the reports and information available at this time, R/Lt. finds the officer's actions were within Department guidelines and consistent with the Use of Force Model.

77. LIEUTENANT OR ABOVE/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. 1075918 OBTAINED

78. LIEUTENANT OR ABOVE/OCIC (Print Name)

HELWINK MASTERS, DANY J

SIGNATURE

DATE COMPLETED

TIME

30-JUN-2015 07:43:18

79. TOTAL TRR's THIS EVENT No.

1



TASER Information

Serial X30001H2W
Model TASER X2
Firmware Version Rev. 04.010
Application Version 3.13.4
Health Good

Offline Report

Local Timezone Central Daylight Time (UTC -05:00)
Generated On 30 Jun 2015 06:27:57

Dates from : Mon Jun 29 21:00:00 2015 **to :** Tue Jun 30 07:00:00 2015
Device (X2)

Seq #	Local Time [DD:MM:YYYY hh:mm:ss]	Event [Event Type]	Cartridge Info [Bay: length in feet/status]	Duration [Seconds]	Temp [Degrees Celcius]	Batt Remaining [%]
1274	29 Jun 2015 23:03:22	Armed	C1: 25' Standard C2: 25' Standard		24	73
1275	29 Jun 2015 23:03:23	Arc	C1: 25' Standard C2: 25' Standard	1		73
1276	29 Jun 2015 23:03:24	Safe	C1: 25' Standard C2: 25' Standard	2	24	73
1277	30 Jun 2015 02:51:34	Armed	C1: 25' Standard C2: 25' Standard		26	73
1278	30 Jun 2015 02:51:52	Trigger	C1: Deployed	5		73
1279	30 Jun 2015 02:51:55	Trigger	C2: Deployed	5		73
1280	30 Jun 2015 02:52:03	Arc	C1: Deployed C2: Deployed	1		72
1281	30 Jun 2015 02:52:03	Arc	C1: Deployed C2: Deployed	3		72
1282	30 Jun 2015 02:52:09	Arc	C1: Deployed C2: Deployed	5		72
1283	30 Jun 2015 03:05:34	Safe	C1: Deployed C2: Deployed	840	41	68
1284	30 Jun 2015 06:27:14	USB Connected				
1285	30 Jun 2015 06:25:52	Time Sync	30 Jun 2015 06:27:31 to 30 Jun 2015 06:25:52			

OFFICER'S BATTERY REPORT
CHICAGO POLICE DEPARTMENT

RD NO. [REDACTED]

INSTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties.

"X APPLICABLE BOXES"

OFFICER INFORMATION			INCIDENT INFORMATION		
NAME (LAST - FIRST - M.I.) PAGE, RICKY L			<input checked="" type="checkbox"/> 1. INDOOR <input type="checkbox"/> 2. OUTDOOR		
STAR NO. 11349 POSITION POLICE OFFICER			ADDRESS OF OCCURRENCE [REDACTED]		
DATE OF APPOINTMENT 15-MAR-2013 EMPLOYEE NO. [REDACTED]			CITY <input checked="" type="checkbox"/> CHICAGO STATE (If outside Chicago) [REDACTED]		
UNIT OF ASSIGNMENT 011 BEAT/CALL NO. 1106E			LOCATION CODE 090-APARTMENT BEAT OF OCCURRENCE 1131		
SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F RACE BLACK DOB [REDACTED]			DATE OF OCCURRENCE 30-JUN-2015 TIME 02:53:00 DAY OF WEEK TUESDAY		
HEIGHT 602 WEIGHT 195			NO. OF OFFICERS BATTERED <u>1</u>		
TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED			WERE THERE ASSISTING UNITS ON SCENE? 1. <input checked="" type="checkbox"/> YES 2. <input type="checkbox"/> NO		
<input checked="" type="checkbox"/> 1. ON DUTY <input type="checkbox"/> A. UNIFORM, PATROL DUTY <input type="checkbox"/> B. UNIFORM, OTHER DUTY Describe _____ <input checked="" type="checkbox"/> C. CITIZEN'S DRESS <input type="checkbox"/> D. TACTICAL <input type="checkbox"/> E. B.I.S. UNIT <input type="checkbox"/> F. SPECIAL EMPLOYMENT <input type="checkbox"/> G. OTHER _____ <input type="checkbox"/> 2. OFF DUTY <input type="checkbox"/> 3. SPECIAL EMPLOYMENT <input type="checkbox"/> 4. SECONDARY / OTHER			IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS)? <u>9</u>		
WORKING: <input type="checkbox"/> A. ALONE <input checked="" type="checkbox"/> B. WITH ONE PARTNER <input type="checkbox"/> C. WITH MULTIPLE PARTNERS How many? _____ PATROL TYPE: <input checked="" type="checkbox"/> A. SQUAD CAR <input type="checkbox"/> B. FOOT <input type="checkbox"/> C. BICYCLE <input type="checkbox"/> D. APV/MOTORCYCLE <input type="checkbox"/> E. SQUADROL <input type="checkbox"/> F. OTHER _____			MANNER OF ATTACK <input type="checkbox"/> 01. SHOT <input type="checkbox"/> 02. SHOT AT <input type="checkbox"/> 03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT) <input type="checkbox"/> 04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT) <input checked="" type="checkbox"/> 05. OTHER (INCLUDING VERBAL THREATS)		
TYPE OF ACTIVITY			TYPE OF WEAPON/THREAT		
<input type="checkbox"/> A. AMBUSH -NO WARNING <input type="checkbox"/> B. TRAFFIC STOP/PURSUIT <input type="checkbox"/> C. INVESTIGATING SUSPICIOUS PERSON <input type="checkbox"/> D. DISTURBANCE - DOMESTIC <input type="checkbox"/> E. DISTURBANCE - MENTAL PATIENT <input type="checkbox"/> F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER <input type="checkbox"/> G. DISTURBANCE - OTHER <input type="checkbox"/> H. MAN WITH A GUN <input checked="" type="checkbox"/> I. PURSUING/ARRESTING OFFENDER (Specify) CHARGE 720 ILCS 5.0/9-1-A-1-MURDER - FIRST DEGREE IUCR CODE HOMICIDE - FIRST DEGREE MURDER <input type="checkbox"/> J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify) ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____ <input type="checkbox"/> K. OTHER			(Check all that apply): <input type="checkbox"/> A. FIREARM CALIBER _____ <input type="checkbox"/> D. HANDS/FISTS <input type="checkbox"/> 1. REVOLVER <input type="checkbox"/> E. FEET <input type="checkbox"/> 2. SEMI-AUTOMATIC <input type="checkbox"/> F. MOUTH (SPIT, BITE, ETC.) <input type="checkbox"/> 3. RIFLE <input checked="" type="checkbox"/> G. VERBAL THREAT (ASSAULT) <input type="checkbox"/> 4. SHOTGUN <input checked="" type="checkbox"/> H. OTHER (SPECIFY) <input type="checkbox"/> B. VEHICLE <u>/REFUSED TO RELINQUISH WEAPON</u> <input type="checkbox"/> 1. OFFICER STRUCK WITH VEHICLE <input type="checkbox"/> 2. ATTEMPTED TO STRIKE OFFICER WITH VEHICLE <input type="checkbox"/> C. KNIFE/OTHER CUTTING INSTRUMENT <input type="checkbox"/> I. BLUNT INSTRUMENT		
TYPE OF INJURY TO OFFICER			FIREARM USE INFORMATION (Check all that apply):		
<input type="checkbox"/> A. FATAL <input type="checkbox"/> B. NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/Internal Injuries) <input type="checkbox"/> C. NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions) <input checked="" type="checkbox"/> D. NONE APPARENT/NONE			<input type="checkbox"/> A. OFFICER AT GUNPOINT <input type="checkbox"/> B. OFFICER'S OWN WEAPON OBTAINED <input type="checkbox"/> C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON		
LIGHTING CONDITIONS AT INCIDENT			OFFENDER INFORMATION		
<input type="checkbox"/> A. DAYLIGHT <input type="checkbox"/> D. DUSK <input type="checkbox"/> B. NIGHT <input checked="" type="checkbox"/> E. ARTIFICIAL LIGHT <input checked="" type="checkbox"/> 1. POOR <input type="checkbox"/> 2. GOOD			SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F RACE BLACK DOB [REDACTED] CB NO. [REDACTED] IR NO. [REDACTED]		
WEATHER CONDITIONS			WAS THE OFFENDER'S ACTIVITY: DRUG RELATED? GANG RELATED?		
<input checked="" type="checkbox"/> A. CLEAR <input type="checkbox"/> D. FOG / SMOKE / HAZE <input type="checkbox"/> G. OTHER <input type="checkbox"/> B. RAIN <input type="checkbox"/> E. SLEET / HAIL <input type="checkbox"/> C. SNOW <input type="checkbox"/> F. SEVERE CROSS WIND			<input type="checkbox"/> 1. YES <input checked="" type="checkbox"/> 2. NO <input type="checkbox"/> 3. UNKNOWN		
APPROXIMATE OUTDOOR TEMPERATURE: 65°F			NO. OF OFFENDERS PRESENT? <u>1</u>		

INCIDENT OCCURRED AT THE SCENE OF A HOMICIDE

REPORTING MEMBER - SIGNATURE
PAGE, RICKY L

STAR NO.
11349

WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE STAR NO.
HELWINK MASTERS, DANY J 261

SUPPLEMENTARY REPORT

CHICAGO POLICE

1. NUMBER OF COPIES OF THIS REPORT REQUIRED

HOMICIDE: 1ST DEGREE

2. NUMBER OF COPIES OF THIS REPORT REQUIRED

3. DATE OF INCIDENT (MONTH, DAY, YEAR)

0110

4. DATE OF REPORT (MONTH, DAY, YEAR)

0110

5. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

6. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

7. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

8. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

9. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

10. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

11. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

12. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

13. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

14. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

15. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

16. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

17. DATE OF REPORT (MONTH, DAY, YEAR)

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18. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

19. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

20. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

21. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

22. DATE OF REPORT (MONTH, DAY, YEAR)

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23. DATE OF REPORT (MONTH, DAY, YEAR)

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24. DATE OF REPORT (MONTH, DAY, YEAR)

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25. DATE OF REPORT (MONTH, DAY, YEAR)

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26. DATE OF REPORT (MONTH, DAY, YEAR)

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27. DATE OF REPORT (MONTH, DAY, YEAR)

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28. DATE OF REPORT (MONTH, DAY, YEAR)

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29. DATE OF REPORT (MONTH, DAY, YEAR)

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30. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

31. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

32. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

33. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

34. DATE OF REPORT (MONTH, DAY, YEAR)

APARTMENT

30 JUN 15

0230

1132

111R

090

1. MONEY <input type="checkbox"/> T \$ <input type="checkbox"/> R		2. JEWELRY <input type="checkbox"/> T \$ <input type="checkbox"/> R		3. FURS <input type="checkbox"/> T \$ <input type="checkbox"/> R		4. CLOTHING <input type="checkbox"/> T \$ <input type="checkbox"/> R		5. OFFICE EQUIPMENT <input type="checkbox"/> T \$ <input type="checkbox"/> R		6. TV, RADIO, STEREO <input type="checkbox"/> T \$ <input type="checkbox"/> R		7. PROPERTY INVENTORY NOISE							
8. HOUSEHOLD GOODS <input type="checkbox"/> T \$ <input type="checkbox"/> R		9. CONSUM. GOODS <input type="checkbox"/> T \$ <input type="checkbox"/> R		10. FIREARMS <input type="checkbox"/> T \$ <input type="checkbox"/> R		11. NARC. DANGEROUS DRUGS <input type="checkbox"/> T \$ <input type="checkbox"/> R		12. OTHER <input type="checkbox"/> T \$ <input type="checkbox"/> R		13. NONE <input type="checkbox"/> T \$ <input type="checkbox"/> R									
14. OFFENDER'S NAME (OR DESCRIBE CLOTHING, ETC.)				15. HOME ADDRESS				16. SEX-RACE-AGE CODE		HEIGHT		WEIGHT		EYES		HAIR		COMPL.	
[REDACTED]				[REDACTED]				M-1-49		510		210		BRN		BRN		MED	
17. DOB [REDACTED] (IN CUSTODY)				18. I.R. NO. [REDACTED]				19. OFFENDER REL. CODE [REDACTED]		20. C.B. NO. [REDACTED]		21. I.R. NO. Y.D. NO. [REDACTED]		22. OFFENDER REL. CODE [REDACTED]		23. 15 NO. [REDACTED]		24. ARREST UNIT NO. [REDACTED]	
15. OFF. 1 [REDACTED]				16. OFF. 2 [REDACTED]				17. OFF. 3 [REDACTED]				18. OFF. 4 [REDACTED]				19. OFF. 5 [REDACTED]			
20. OFF. 6 [REDACTED]				21. OFF. 7 [REDACTED]				22. OFF. 8 [REDACTED]				23. OFF. 9 [REDACTED]				24. OFF. 10 [REDACTED]			
25. OFF. 11 [REDACTED]				26. OFF. 12 [REDACTED]				27. OFF. 13 [REDACTED]				28. OFF. 14 [REDACTED]				29. OFF. 15 [REDACTED]			
30. OFF. 16 [REDACTED]				31. OFF. 17 [REDACTED]				32. OFF. 18 [REDACTED]				33. OFF. 19 [REDACTED]				34. OFF. 20 [REDACTED]			
35. OFF. 21 [REDACTED]				36. OFF. 22 [REDACTED]				37. OFF. 23 [REDACTED]				38. OFF. 24 [REDACTED]				39. OFF. 25 [REDACTED]			
40. OFF. 26 [REDACTED]				41. OFF. 27 [REDACTED]				42. OFF. 28 [REDACTED]				43. OFF. 29 [REDACTED]				44. OFF. 30 [REDACTED]			
45. OFF. 31 [REDACTED]				46. OFF. 32 [REDACTED]				47. OFF. 33 [REDACTED]				48. OFF. 34 [REDACTED]				49. OFF. 35 [REDACTED]			
50. OFF. 36 [REDACTED]				51. OFF. 37 [REDACTED]				52. OFF. 38 [REDACTED]				53. OFF. 39 [REDACTED]				54. OFF. 40 [REDACTED]			
55. OFF. 41 [REDACTED]				56. OFF. 42 [REDACTED]				57. OFF. 43 [REDACTED]				58. OFF. 44 [REDACTED]				59. OFF. 45 [REDACTED]			
60. OFF. 46 [REDACTED]				61. OFF. 47 [REDACTED]				62. OFF. 48 [REDACTED]				63. OFF. 49 [REDACTED]				64. OFF. 50 [REDACTED]			
65. OFF. 51 [REDACTED]				66. OFF. 52 [REDACTED]				67. OFF. 53 [REDACTED]				68. OFF. 54 [REDACTED]				69. OFF. 55 [REDACTED]			
70. OFF. 56 [REDACTED]				71. OFF. 57 [REDACTED]				72. OFF. 58 [REDACTED]				73. OFF. 59 [REDACTED]				74. OFF. 60 [REDACTED]			
75. OFF. 61 [REDACTED]				76. OFF. 62 [REDACTED]				77. OFF. 63 [REDACTED]				78. OFF. 64 [REDACTED]				79. OFF. 65 [REDACTED]			
80. OFF. 66 [REDACTED]				81. OFF. 67 [REDACTED]				82. OFF. 68 [REDACTED]				83. OFF. 69 [REDACTED]				84. OFF. 70 [REDACTED]			
85. OFF. 71 [REDACTED]				86. OFF. 72 [REDACTED]				87. OFF. 73 [REDACTED]				88. OFF. 74 [REDACTED]				89. OFF. 75 [REDACTED]			
90. OFF. 76 [REDACTED]				91. OFF. 77 [REDACTED]				92. OFF. 78 [REDACTED]				93. OFF. 79 [REDACTED]				94. OFF. 80 [REDACTED]			
95. OFF. 81 [REDACTED]				96. OFF. 82 [REDACTED]				97. OFF. 83 [REDACTED]				98. OFF. 84 [REDACTED]				99. OFF. 85 [REDACTED]			
100. OFF. 86 [REDACTED]				101. OFF. 87 [REDACTED]				102. OFF. 88 [REDACTED]				103. OFF. 89 [REDACTED]				104. OFF. 90 [REDACTED]			
105. OFF. 91 [REDACTED]				106. OFF. 92 [REDACTED]				107. OFF. 93 [REDACTED]				108. OFF. 94 [REDACTED]				109. OFF. 95 [REDACTED]			
110. OFF. 96 [REDACTED]				111. OFF. 97 [REDACTED]				112. OFF. 98 [REDACTED]				113. OFF. 99 [REDACTED]				114. OFF. 100 [REDACTED]			
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